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# TRANSMITTAL FORM

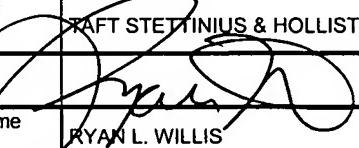
(to be used for all correspondence after initial filing)

	Application Number	10/612,784	
	Filing Date	7/2/2003	
	First Named Inventor	WASIELEWSKI, RAY C.	
	Art Unit	3738	
	Examiner Name	SNOW, BRUCE EDWARDS	
Total Number of Pages in This Submission	5	Attorney Docket Number	ORW01-GN004

**ENCLOSURES (Check all that apply)**

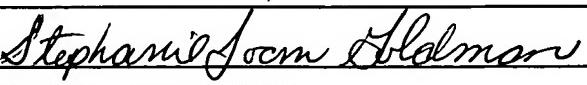
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> ITEMIZED RETURN POST CARD
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
<b>Remarks</b>		
INFORMATION DISCLOSURE STATEMENT (2 PGS), INCLUDING PTO/SB/08A (1 PG)		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	RAFT STETTINIUS & HOLLISTER LLP		
Signature			
Printed name	RYAN L. WILLIS		
Date	JANUARY 2, 2009	Reg. No.	48,787

**CERTIFICATE OF TRANSMISSION/MAILING**

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Typed or printed name	STEPHANIE JOAN GOLDMAN	Date	JANUARY 2, 2009

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Jan. 2, 2009  
(Date)

Stephanie Joan Goldman  
Stephanie Joan Goldman

#### PATENT

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

##### Application of:

Applicant : Wasielewski, Ray C.  
Serial No. : 10/612,784  
Filed On : 7/2/2003  
Title : AFTER TOTAL HIP ARthroPLASTY  
Docket No. : ORW01-GN004  
Examiner : Snow, Bruce Edward  
Art Unit : 3738

Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313

Dear Sir:

#### SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Pursuant to 37 C.F.R. § 1.97, the Examiner's attention is directed to the references listed on the attached Form PTO-SB-08A.

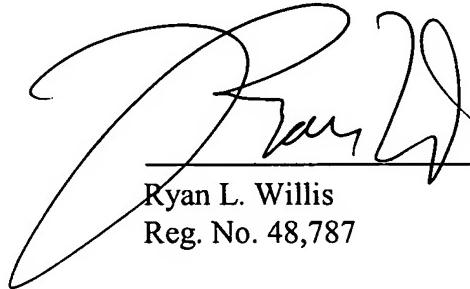
Pursuant to 37 C.F.R. § 1.17(p), applicant states that no item of information contained in the information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign application, and, to the knowledge of the person signing the certification after making reasonable inquiry, no item of information contained in the information disclosure statement was known to any individual designated in § 1.56(c) more than three months prior to

**Information Disclosure Statement  
ORW01-GN004  
Page 2**

the filing of the information disclosure statement.

It is to be understood that the present disclosure of art is in no way intended to be a waiver of any arguments or defenses available to the Applicant under the rules of the U.S. Patent and Trademark Office and the statutes of the United States. No fee is required. The Commissioner is hereby authorized to charge any additional fees that may be required by this paper, or to credit any overpayment to Deposit Account 50-3072.

Respectfully submitted,



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Reg. No. 48,787

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